



## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

OR

Declaration
Submitted
with Initial
Filing

Declaration
Submitted after
Initial Filing—
surcharge 37 CFR
1.16(e) required

Attorn y Docket N .	CIRC016  Mark Vange					
First Named Inv ntor						
COMPLETE IF KNOWN						
Application Number	09/835,938					
Filing Date	04/16/01					
Group Art Unit						
Examiner Name						

As a below named Inventor	, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
METHOD AND SYSTEM FOR OVERCOMING DENIAL OF SERVICE ATTACKS									
the specification of which									
is attached hereto									
OR									
was filed on (MM/DD/YYYY)	04/16/01	as U.S. Application PCT International	as U.S. Application No. or PCT International Application No.						
and was amended on (MM/DD/YYYY)		(if applicable)							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to d	disclose information whic	h is material to patental	oility as defined in	37 CFR 1.5	56.				
I hereby claim foreign priority benefits under 35 U.S.C § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Appl. No.(s	) Country	Foreign Filing Date Priority Not Certified Copy Att (MM/DD/YYYY) Claimed Yes			py Attached? No				
					. 🔲				
☐ Additional foreign appli	cation nos. are listed on	a supplemental priority	data sheet PTO/S	SB/02B attac	ched hereto:				
Additional foreign application nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:  I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.									
Application Number(s)	Filing Date (MM/DD/	YYYY)							
60/197,490	4/17/00								
				<del></del>					

DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s) or 365(c) of any PCT international application designating the United States of America, listed below and, Insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application												
U.S. Pa	rent App	olication or PC	T Parent No	<u> </u>	Par	ent Filing		•		arent l		nt No. ible)
							• • •					
☐ Additiona	ıl U.S. or	PCT internatio	nal applicatio	n nos. lis	ted on	PTO/SB/	02B a	ttache	d here	to.		
Additional U.S. or PCT international application nos. listed on PTO/SB/02B attached hereto.  As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith:  Customer Number 25235  Place bar code label here → □  OR  Registered practitioner(s) name/registration number listed below  25235												
	Name		Registra Numb	tion			PATI Name	ENT TRAI	DEMARK C	OFFICE		gistration Number
	.141110									$\Box$		
☐ Additiona	al register	ed practitioner	(s) named on	supplem	nental s	sheet PTC	)/SB/0	)2C at	tached	heret	0.	
	☐ Additional registered practitioner(s) named on supplemental sheet PTO/SB/02C attached hereto.  Direct all correspondence to: ☐ Customer Number OR ☑ Correspondence or Bar Code Label address below											
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of So			☐ A petition	n has bee	en filed	for this u	insigne	ed inve	entor.			
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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental She t Page 1 of 1

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